6,805,203

PTO/SB/81A (12-08)
Approved for use through 11/30/2011. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number.

**PATENT - POWER OF ATTORNEY** 

Patent Number

OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		Issue Date		October 19, 2004		
		First Na	First Named Inventor Jan		ames G. Retzloff	
		Title	Title Cover Plate for Concealed Sprinkler			
		Attorne	Attorney Docket No. 6065-000017/US		0017/US	
I hereby revoke all previous powers of attorney given in the above-identified patent.						
A Power of Attorney is submitted herewith.						
I hereby appoint Practitioner(s) associa attorney(s) or agent(s) with respect to the United States Patent and Tradema	bove, and	ove, and to transact all business in 27572				
OR  I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:						
Practitioner(s) Name	Registration Number	-	Practitioner(s) Name		Registration Number	
						l
					]	l
						į
Please recognize or change the correspondence address for the above-identified patent to:    X   The address associated with the above-mentioned Customer Number.    OR   The address associated with Customer Number:						
OR						
Firm or Individual Name						
Address						
City	State		Zip	Τ		
Country	Telephone		Email			
I am the:			1	<del>!</del>		
Inventor, having ownership of the patent.  OR  X Patent owner.  Statement under 37 CFR 3.73(b) (Fofin PJO/SB/96) submitted herewith or filed on						
SIGNATURE of Inventor or Patent Owner						
Signature Kahal A			Date		11/10	
Name Michael J. Besn	Michael J. Besma		Telephone		o/ IV	
Title and Company President						
NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
*Total of1 forms are submitted.						